

1/24/2017

Schools and Libraries Program: CC Docket No. 02-6

To Whom It May Concern:

Newaygo County RESA (BEN 131521) submitted an online Form 472 (BEAR) for Funding Year 2015, Application 996695, FRN 2744622 for SPIN 143003990 on 7/21/2016 (see Attachment A, Item 1). This online BEAR was audited by USAC. The information was submitted to USAC but lacked the service certification page so was denied (see Attachment B). The online BEAR was resubmitted on 9/13/2016 (see Attachment A, Item 2). The online BEAR was again audited by USAC (see Attachment C). We inadvertently listed a different contact person on the service certification page than the authorized signer so the BEAR was once again denied.

We are requesting a one-time extension to resubmit this 2015 BEAR that is for our Internet access in the county and services our local school districts. The auditing process can be confusing and we had no idea we did it incorrectly for a second time until we received the denial notification, which was after the original date to submit for Funding Year 2015. This money greatly benefits the students of Newaygo County in rural Michigan. We respectfully request this waiver as we believe no waste, fraud, or abuse of the program occurred.

If there are any questions, please do not hesitate to contact me. Thank you very much for your consideration of our request.

Sincerely,



Jodi DeKuiper
Chief Financial Officer
Newaygo County RESA
Email: jdekuiper@ncresa.org

Attachment A

Track BEAR Forms

Please choose from one or more of the following search options:

Created Date Range:	From:	6/1/2016	To:	1/20/2017
Dollar Amount:	Min:		Max:	
SPIN:				
Invoice Id:				
Applicant Form Identifier:				

Display Results As:

☒ BEAR

☐ FRN

[Search](#)

Search Results:

Invoice Id	Applicant Form Identifier	SPIN	Status	Reimbursement Amount	Contact Name	Date Created
2413329	NC RESA 15/16 Comcast	143003990	COMPLETED	\$19,174.06	LARRY IVENS	7/21/2016 8:07:28 AM
2407448	Bear NCRESA 15/16	143001727	COMPLETED	\$2,660.69	LARRY IVENS	7/7/2016 3:57:53 PM
2413310	NC RESA 15/16 Internet	143001192	COMPLETED	\$42,682.22	LARRY IVENS	7/21/2016 8:05:11 AM
2432545	NC RESA 15/16 Comcast	143003990	COMPLETED	\$19,174.06	LARRY IVENS	9/13/2016 11:36:02 AM
2594601	NCRESA Comcast 1516	143003990	COMPLETED	\$19,174.06	LARRY IVENS	1/18/2017 2:58:41 PM

Item

1

2

From: Nielsen, Sandy <sandyn@ncresa.org>
Sent: Tuesday, January 24, 2017 1:37 PM
To: Missy Studley; Janelle Morgan
Subject: FW: SLD Invoice No.:2413329
Attachments: Copy of comcast billing.xlsx; Comcast Bills To Send to USF.docx

Here's some correspondence from 8/26/16.



Sandy Nielsen

Senior Systems Technician
NCATS
Newaygo County RESA
www.ncresa.org

P: 231.924.8855 • F: 231.924.8817 • sandyn@ncresa.org

From: Nielsen, Sandy
Sent: Friday, August 26, 2016 10:34 AM
To: 'Maurice.Blackwell@sl.universalservice.org' <Maurice.Blackwell@sl.universalservice.org>
Cc: Ivens, larry <larry@ncresa.org>; Phillips, Joel <jphillips@ncresa.org>
Subject: RE: SLD Invoice No.:2413329

Attached is a spreadsheet showing our monthly bills and a file showing copies of each of our bills. The monthly charge for this service is \$3,135.00.

The first bill includes over a month.

The total of our bills came to \$31,956.77. We only use 75% of this service for our schools.

$\$31,956.77 * 75\% = \$23,967.58$

Please let us know if you need any additional information.

Thanks and have a great day!



Sandy Nielsen

Senior Systems Technician
NCATS
Newaygo County RESA
www.ncresa.org

P: 231.924.8855 • F: 231.924.8817 • sandyn@ncresa.org

From: Ivens, larry
Sent: Friday, August 19, 2016 1:45 PM
To: Nielsen, Sandy <sandyn@ncresa.org>
Subject: FW: SLD Invoice No.:2413329



Larry Ivens

Executive Director of Technology Services
NCATS
Newaygo County RESA
www.ncresa.org

P: 231.924.8838 • F: 231.924.8817 • larry@ncresa.org
NCATS

From: Blackwell, Maurice [<mailto:Maurice.Blackwell@sl.universalservice.org>]
Sent: Friday, August 19, 2016 1:15 PM
To: Ivens, larry <larry@ncresa.org>
Cc: LARRY IVENS@1(231)-924-8898 <IMCEAFAX-LARRY+20IVENS+401+28231+29-924-8898@solixinc.com>
Subject: SLD Invoice No.:2413329

SLD Invoice No	SP_App Invoice No	Line ID	Customer Billed Date	Customer Ship Date	471	FRN	SPIN
2413329	NC RESA 15/16 Comcast	8084114	01-Jul-15		996695	2744622	143003990

I am reviewing your request for reimbursement of the invoice line/s noted above.

BILLS:

Either A:

If the request for reimbursement for each FRN per Invoice is comprised of 20 bills or less (sub-bills and sub accounts may contribute to this figure):

Please submit:

- I. A copy of the summary page/s for the bill/s for BEARs: received from Service Provider, to show:
 - a. Bill Date,
 - b. Service Provider Name,
 - c. Bill-To Entity,
 - d. Current Charges,
 - e. Description of Products / Services Delivered,
 - f. Period of Service (for Internet Access),
 - g. Individual Call Detail NOT required (for phone bills).

- II. As guidance, a worksheet (sample attached) to summarize the bill/s (by month/ account number, as applicable) and to indicate:
 - a. Total current charge per bill,
 - b. Identification and removal of all ineligible products and services,
 - c. Calculation of the Undiscounted/Requested amounts.
- III. If any locations on the bills / worksheet are cross connect / meet points, please identify and state the Entity/s receiving the service.
- IV. If the invoice is for deposits or up-front charges for services, please include a copy of the full contract that supports those charges.

Or B:

If the request for reimbursement for each FRN per Invoice is comprised of more than 20 bills (sub-bills and sub accounts may contribute to this figure):

Please initially submit:

- I. Only a worksheet (sample attached) to summarize the bill/s (by month/ account number, as applicable) and to indicate:
 - a. Total current charge per bill,
 - b. Identification and removal of all ineligible products and services,
 - c. Calculation of the Undiscounted/Requested amounts.
- II. The completed worksheet certification form (attached) to certify the accuracy of the worksheet.
- III. If any locations on the bills / worksheet are cross connect / meet points, please identify and state the Entity/s receiving the service.
- IV. If the invoice is for deposits or up-front charges for services, please include a copy of the full contract that supports those charges.

Upon receipt of the worksheet by the SLP, you will be required to provide a sampling of bills (selected by SLP) to verify the worksheet.

- V. The bills <for SPIs: sent to Applicant > / < for BEARs: received from Service Provider>, to show:
 - a. Bill Date,
 - b. Service Provider Name,
 - c. Bill-To Entity,
 - d. Current Charges,
 - e. Description of Products / Services Delivered,
 - f. Period of Service (for Internet Access),
 - g. Individual Call Detail NOT required (for phone bills).

SERVICE CERTIFICATION:

Please also provide the attached Service Certification form, completed and certified by the authorized representative of the Applicant (school/library), for the products/services provided.

- I. The Representative/Contact Name, Title and Phone: the contact name should match as signatory. If the signatory is any other than the Representative/Contact Name identified on the form, please provide the full Name, Title and Phone Number of the signatory and a reason for the mismatch.
- II. Date Goods/Services Delivered: except for installation only invoice, required for all other products / services delivered;
- III. Date Goods/Services were or will be Installed: required only for non-recurring service (products that need installation);
 - a. This date is required regardless of party providing the installation.

- IV. Date Applicant Portion Paid and Check No., or Date to be Paid: required at all times.
- V. Certification box: select box either on the left or right side;
 - a. Left side: for services delivered/installed as on this invoice;
 - i. Based on service contracted for the FRN, please choose either Delivery Only or Delivery and Installation.
 - b. Right side: for services not yet delivered:
 - i. Please provide contract to indicate provision for up-front charges.
- VI. Signed and dated: by the authorized Applicant contact.

Please note: Service Certification forms are Invoice number specific. Due to audit requirements, the re-submittal of an earlier Service Certification form is not acceptable and will result in rejection of the current invoice line/s.

RESPONSE REQUIREMENT:

Service Certification and Payment Verification documents sent to us directly by Applicants (school/library) with the SLP Invoice Number and the name/title/signature of the sender may help speed up the review process. Fax cover sheet must identify the organization.

Please provide this information to me as soon as possible within the next 7 calendar days, by End of Day Friday, 8/26/16. Failure to do so may result in a reduction or rejection of the invoice, without further request. In this event, please ensure you have all necessary documents collected before resubmitting your request. If you have any questions, please contact me within this 7 day period.

Thank you for your cooperation and continued support of the Universal Service Program.

Maurice R. Blackwell
Case Management Associate
Schools and Libraries Program
30 Lanidex Plaza West, Room N210 | Parsippany, NJ 07054
T: 800.200.0818 ext 7596 | Direct: 973.581.7596 | F: 973.599.6539
maurice.blackwell@sl.universalservice.org

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Universal Service Administrative Company

Schools and Libraries Division

Form 472 (BEAR) Notification Letter

September 9, 2016

Jacqueline Means
Comcast Business Communications
1701 JFK Blvd
Philadelphia, PA 19103

Re: Invoice Number - as assigned by USAC: 2413329
Service Provider Identification Number: 143003990
Reimbursement Form Number: NC RESA 15/16 Comcast
Billed Entity Number: 131521

Dr. Larry Ivens
NEWAYGO CO REGIONAL EDUCATIONAL SERVICE AGENCY
4747 W. 48th Street
Fremont, MI 49412

Preferred Mode of Contact: E-mail at larry@ncresa.org
Total Amount of Reimbursement Approved for Payment: \$0.00

This letter is your notification that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has processed an FCC Form 472, "Billed Entity Applicant Reimbursement (BEAR)" Form from the above named applicant listing you as the service provider. USAC has committed to reimburse the discounted portion of the cost of eligible services provided to eligible entities pursuant to one or more FCC Forms 471, "Description of Services Ordered and Certification Form".

In certain instances, a line may not have been paid. Review the BEAR Letter Applicant Reimbursement Report (Report) following this letter for the reason(s) this may have occurred. For more information about lines that have not been paid, see the explanation of Invoice Error Codes in Step 9 on our website. Work with the applicant (your customer) to correct any errors. Once corrected, your customer may submit a new BEAR using the BEAR Online tool from the Apply Online area or Required Forms section of our website to request reimbursement for any unpaid lines.

If a new BEAR cannot be submitted before the invoice deadline passes, you or your customer may submit a request for a deadline extension. (See "Invoice Deadlines and Extension Requests" posted in the SLD section of our website for more information.)

TO APPEAL THIS DECISION:

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
2. State outright that your letter is an appeal. Include the following to identify the USAC decision letter (e.g., FCDL) and the decision you are appealing:
 - Appellant name,
 - Applicant name and service provider name, if different from appellant,

Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685
Visit us online at: www.usac.org/sl

- Applicant BEN and Service Provider Identification Number (SPIN), - FCC Form 471 Application Number and the Funding Request Number (FRN) or Numbers as assigned by USAC,
- "Funding Commitment Decision Letter for Funding Year 2015," AND
- The exact text or the decision that you are appealing.

3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.

4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.

5. Provide an authorized signature on your letter of appeal.

We strongly recommend that you use one of the electronic filing options. To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org or submit your appeal electronically by using the "Submit a Question" feature on the USAC website. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to USAC by fax, fax your appeal to (973) 599-6542. To submit your appeal to USAC on paper, send your appeal to:

Letter of Appeal
Schools and Libraries Division - Correspondence Unit
30 Lanidex Plaza West
PO Box 685
Parsippany, NJ 07054-0685

For more information on submitting an appeal to USAC, please see "Appeals" in the Schools and Libraries section of the USAC website.

The maximum remaining amount available for each Funding Request Number (FRN) listed on the Report will be the original commitment less the amount approved herein for reimbursement and less any earlier disbursements to your customer.

PLEASE NOTE: The type of invoice form (BEAR or SPI) for the funding year is established by the receipt and approval of the first invoice submitted for the FRN for the funding year. For example, if we successfully process a BEAR for an FRN, we will not approve a SPI for that same FRN at a later time.

Please see the Guide to Letter Reports posted on our website for an explanation of the items listed in the attached Report.

COMPLETE PROGRAM INFORMATION is posted on our website. You may also contact our Client Service Bureau using the "Submit a Question" link on our website, toll-free by fax at 1-888-276-8736 or toll-free by phone at 1-888-203-8100.

Schools and Libraries Division
Universal Service Administrative Company

CC: NEWAYGO CO REGIONAL EDUCATIONAL SERVICE AGENCY

BEAR NOTIFICATION LETTER APPLICANT REIMBURSEMENT REPORT

Form 471 Application Number: 996695
Funding Request Number: 2744622
Funding Year 2015: 07/01/2015 - 06/30/2016
Contract Number: MI-190937-022015-01
Funding Commitment Decision: \$22572.00
Reimbursement Amount for this FRN: \$0.00
Reimbursement Request Decision Explanation:
Service Receipt Not Confirmed By Applicant;



Janelle Morgan

Attachment C

From: Janelle Morgan <janelle@elitefund.com>
Sent: Friday, December 16, 2016 1:16 PM
To: Patrick.PAULS@sl.universalservice.org
Cc: 'Nielsen, Sandy'
Subject: FW: SLD Invoice No.:2432545
Attachments: Comcast Bills To Send to USF.DOCX; Copy of comcast billing.xlsx; Signed service cert.pdf

Hi Patrick,

Please find attached the information you requested. If we've missed anything, please let us know and we will get it to you ASAP. Thanks!

Janelle Morgan

Phone: 800.705.9703
Fax: 815.717.9761
406 N. State St., PO Box 125
Stanton, MI 48888
CRN: 16043589

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From: Nielsen, Sandy [mailto:sandyn@ncresa.org]
Sent: Friday, December 16, 2016 9:09 AM
To: Janelle Morgan <janelle@elitefund.com>
Subject: FW: SLD Invoice No.:2432545

Is this something you can assist with? I'll see if I can find all that we sent last time we heard from them on this invoice.

Thanks!



Sandy Nielsen
Senior Systems Technician
NCATS
Newaygo County RESA
www.ncresa.org

P: 231.924.8855 • F: 231.924.8817 • sandyn@ncresa.org

From: Ivens, larry
Sent: Thursday, December 15, 2016 4:28 PM

To: Nielsen, Sandy <sandyn@ncresa.org>

Subject: FW: SLD Invoice No.:2432545

Please call this guy



Larry Ivens

Executive Director of Technology Services

NCATS

Newaygo County RESA

www.ncresa.org

P: 231.924.8838 • F: 231.924.8817 • larry@ncresa.org

NCATS

From: Pauls, Patrick [<mailto:Patrick.PAULS@sl.universalservice.org>]

Sent: Thursday, December 15, 2016 2:21 PM

To: Ivens, larry <larry@ncresa.org>

Cc: 'LARRY IVENS@1(231)-924-8898' <IMCEAFAX-LARRY+20IVENS+401+28231+29-924-8898@solixinc.com>

Subject: RE: SLD Invoice No.:2432545

Larry,

The invoice below has been reassigned to me. Can you please give me a status on the information requested?

Thank you

Patrick Pauls

Case Management Invoicing Associate

30 Lanidex Plaza West | Parsippany, NJ 07054

T: 973.581.5160 | F: 973.599.6502

ppauls@sl.universalservice.org

From: Blackwell, Maurice

Sent: Tuesday, September 20, 2016 3:20 PM

To: 'larry@ncresa.org'

Cc: 'LARRY IVENS@1(231)-924-8898'

Subject: SLD Invoice No.:2432545

SLD Invoice No	SP_App Invoice No	Line ID	Customer Billed Date	Customer Ship Date	471	FRN	SPI
2432545	NC RESA 15/16 Comcast	8161917	01-Jul-15		996695	2744622	143003!

I am reviewing your request for reimbursement of the invoice line/s noted above.

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- II. Date Goods/Services Delivered: except for installation only invoice, required for all other products / services delivered;
- III. Date Goods/Services were or will be Installed: required only for non-recurring service (products that need installation);
 - a. This date is required regardless of party providing the installation.
- IV. Date Applicant Portion Paid and Check No., or Date to be Paid: required at all times.
- V. Certification box: select box either on the left or right side;
 - a. Left side: for services delivered/installed as on this invoice;
 - i. Based on service contracted for the FRN, please choose either Delivery Only or Delivery and Installation.
 - b. Right side: for services not yet delivered:
 - i. Please provide contract to indicate provision for up-front charges.
- VI. Signed and dated: by the authorized Applicant contact.

Please note: Service Certification forms are Invoice number specific. Due to audit requirements, the re-submittal of an earlier Service Certification form is not acceptable and will result in rejection of the current invoice line/s.

RESPONSE REQUIREMENT:

Service Certification and Payment Verification documents sent to us directly by Applicants (school/library) with the SLP Invoice Number and the name/title/signature of the sender may help speed up the review process. Fax cover sheet must identify the organization.

Please provide this information to me as soon as possible within the next 7 calendar days, by End of Day Tuesday, 9/27/16. Failure to do so may result in a reduction or rejection of the invoice, without further request. In this event, please ensure you have all necessary documents collected before resubmitting your request. If you have any questions, please contact me within this 7 day period.

Thank you for your cooperation and continued support of the Universal Service Program.

Maurice R. Blackwell
Case Management Associate
Schools and Libraries Program
30 Lanidex Plaza West, Room N210 | Parsippany, NJ 07054
T: 800.200.0818 ext 7596 | Direct: 973.581.7596 | F: 973.599.6539
maurice.blackwell@sl.universalservice.org

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this e-mail and any of its attachments is STRICTLY PROHIBITED. If you have received this e-mail in error, please immediately notify the sender via return e-mail; delete this e-mail and all attachments from your e-mail system and your computer system and network; and destroy any paper copies you may have in your possession. Thank you for your cooperation.

Janelle Morgan

From: Nielsen, Sandy <sandyn@ncresa.org>
Sent: Friday, January 20, 2017 9:47 AM
To: Missy Studley; Janelle Morgan
Cc: Phillips, Joel
Subject: FW: YOUR E-RATE PROGRAM REMITTANCE STATEMENT: 443001628

Does this mean we need to go through the appeal process?



Sandy Nielsen

Senior Systems Technician
NCATS
Newaygo County RESA
www.ncresa.org

P: 231.924.8855 • F: 231.924.8817 • sandyn@ncresa.org

From: Dekuiper, Jodi
Sent: Friday, January 20, 2017 8:24 AM
To: Nielsen, Sandy <sandyn@ncresa.org>
Subject: FW: YOUR E-RATE PROGRAM REMITTANCE STATEMENT: 443001628

fyi



Jodi DeKuiper

Chief Financial Officer
Business Office
Newaygo County RESA
www.ncresa.org

P: 231.924.8859 • F: 231.924.8817 • jdekuiper@ncresa.org

From: CustomerSupport@usac.org [mailto:CustomerSupport@usac.org]
Sent: Thursday, January 19, 2017 4:09 PM
To: Dekuiper, Jodi <jdekuiper@ncresa.org>
Subject: YOUR E-RATE PROGRAM REMITTANCE STATEMENT: 443001628



Helping Keep Americans Connected | www.usac.org

**SCHOOLS AND LIBRARIES BEAR PROGRAM REMITTANCE STATEMENT
AS OF JANUARY 19, 2017**

**Attn: Jodi DeKuiper
NEWAYGO CO REGIONAL EDUCATIONAL SERVICE AGENCY**

RE: FCC Form 498 ID 443001628

This notice provides an explanation of your entity's Billed Entity Applicant Reimbursement (BEAR) payment for the following invoices.

	Approved
1/19/2017 143003990 Comcast Business Communications 2744622 NCRESA Comcast 1516 Applicant Name:NEWAYGO CO REGIONAL EDUCATIONAL SERVICE AGENCY;SLD Invoice Number:2504601;BEAR Letter Date:01/19/2017;Line Item Detail Number:8371932;Amount Requested:19174.06;Invoice Received Date [01/18/2017] Later Than Invoice Acceptable End Date [10/31/2016];12;	\$0.00
Total Approved Disbursement	<u>\$0.00</u>
Total Actual Disbursement:	<u>\$0.00</u>

If you have any questions, please contact USAC Customer Operations at (888) 641-8722 or CustomerSupport@usac.org. You may also visit us at www.usac.org.

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